Minutes EMS Committee Meeting August 20, 2008

EMS Committee		Bureau Staff
Present	<u>Excused</u>	Jenny Allred
Mark Bair	Jeff Brown	Dennis bang
Tammy Barton	Bud Cox	Dan Camp
George Coombs	Sheila Garvey	Guy Dansie
Kathy Johnson	Steve Pehrson	Tami Goodin
*Kevin Johnson	Shannon Staker	Michelle Hale
Mike Moffitt		Leslie Johnson
Breck Rushton		Allan Liu
Shellie Young		Sharon Ormond
		Paul Patrick
		Irene Petrogeorge
* Kevin Johnson cam	Travis Scoresby	
		Jolene Whitney

Visitors

Neil Coker Jack Meersman Lauara Snyder Garland Fahrner Ron Morris Deanna Wolfe

Tammy Barton opened the meeting and asked if everyone had opportunity to read the minutes. She entertained a motion for approval of the April 2008 minutes.

Breck Rushton moved that the April 2008 minutes be approved as written. Mike Moffitt seconded the motion, and it passed with votes in the affirmative by Mark Bair, Tammy Barton, George Coombs, Kathy Johnson, Mike Moffitt, Breck Rushton, and Shellie Young.

Training and Certification

Travis Scoresby presented the TB Rule change. The changes recommended during the April EMS Committee meeting were made. The Rule now reads:

TB Rule Change

Suggested wording for TB testing requirements for State Training and Certification Standards in R426-12.

Current: "submit a statement from a physician, confirming the applicant's results of a TB examination conducted within the prior year;"

Proposed Change:

"submit to the Department a statement from a physician (or other health care provider) confirming the applicant's <u>negative</u> results of a Tuberculin Skin Test or equivalent (TB test) examination conducted within the prior year."

- (i) If the test is positive, and there is no documented history of prior Latent TB Infection (LTBI) treatment, the applicant must see his primary care physician for a chest x-ray (CXR) in accordance with current CDC guidelines and further evaluation. Results of CXR and medical history must be submitted to the Bureau.
 - a. If the CXR is negative, the applicant's medical history will be reviewed by the State EMS Medical Director. If deemed to be a public health risk, treatment for LTBI must be instituted. After appropriate treatment is begun, the applicant may be cleared for certification. A statement from the

- treating physician must be submitted for review by the State EMS Medical Director. Within one month of completion of treatment, documentation of completion must also be submitted for review. If recommended treatment is not completed, the applicant's certification may be denied.
- b. If the CXR is positive, the applicant is considered to have Active TB. Evaluation and completion of treatment by an appropriate physician will be required prior to certification. Each such case will be reviewed by the State EMS Medical Director.
- c. In the event that an applicant who is required to get treatment refuses the treatment, BEMS may deny certification.
- (ii) A TB test should not be performed on a person who has a documented history of either a prior positive TB test or prior treatment for tuberculosis. The applicant must instead have a CXR in accordance with current CDC guidelines and provide documentation of negative CXR results to the Bureau.
- (iii) If the applicant has had prior treatment for active TB or LTBI, the applicant must provide documentation of this treatment prior to certification. Documentation of treatment will be maintained by the Bureau, and needs only to be provided once. Each such case will be reviewed by the State EMS Medical Director.

Under i "in accordance with current CDC guidelines" allows flexibility and is currently in accordance with the CDC. Also under i(a) "the applicant's medical history will be reviewed by the State EMS Medical Director, if deemed to be a public health risk. Dr. Bair suggested it should also be looked at under the OSHA perspective. Data would include such information as immunizations records from the doctors. There were concerns about "all records" being made available. Dr. Bair said the records are only available from doctor to doctor and it is only to make sure there is no risk to the public. After further discussion it was recommended the rule should state "x-ray or applicable medical history." Deanna Wolfe questioned which records are needed. The agency submits records reports for certification/recertification.

If there is a positive reaction on a skin test, and if treatment is refused, the Bureau has the option to deny certification. Mark Bair was concerned about the use of the word "pertinent" and who would determine the meaning. It was felt that the rule might still need some word-smithing.

Breck Rushton moved that the TB rule change be sent out for public comment. Shellie Young seconded the motion and it passed with votes in the affirmative by Mark Bair, Tammy Barton, George Coombs, Kathy Johnson, Mike Moffitt, Breck Rushton, and Shellie Young.

A Task force will meet on Tuesday, August 26 to review the hours required to become an EMT and EMT-IA..

Jack said they also discussed Stroke/Trauma information as to the patient outcome being given back to the responding agency.

Grants

Ron Morris reported that the EMS Grants has experienced two funding issues. First, funds received from Criminal Fines and Forfeitures were less than anticipated, and second, agencies appear to be spending their funding better. Grants funds were short by \$259,000. The Grants Subcommittee held a teleconference meeting and the consensus was to eliminate Interim grants this year and propose a 20 percent cut in competitive funding across the board.

No letters have been sent out to inform agencies of their funding awards. He said the EMS Committee sets the grants and if wanted, they could go through line by line.

Tammy Barton said this was the most equitable way to do the cuts and the Grants Subcommittee really worked hard on the distribution of funds.

George Coombs asked if all the grant requests were funded. Ron Morris responded that nearly 90 % were funded and 10% were not.

Mike Moffitt moved that the Committee accept that Interim Grants be removed and a 20 percent cut across the Board be made. Agencies will be

approved to use funds as needed.* George Coombs seconded the motion and it was passed with votes in the affirmative by Mark Bair, Tammy Barton, George Coombs, Kathy Johnson, Mike Moffitt, Breck Rushton, and Shellie Young. There were no abstentions or negative votes.

Operations

Lauara Snyder reported that the Operations Subcommittee had two discussion items. The first regarded Dispatch Center Assessments. The plan was rejected as written. The Bureau will now perform assessments on all the dispatch centers. There have been a half-dozen already done. The survey also includes some Pandemic questions. All designated dispatch centers which take EMS calls will be assessed.

There was concern about the smaller agencies because the funding for training was not available, but it was also felt that all call takers must be certified.

The question of why this assessment was being done was answered and Bureau staff will be going to verify and collect data from each center. A group will be formed to examine results.

The second item is a request for a paramedic staffing waiver. Wendover Ambulance Service wants to apply for a Paramedic Rescue Service, but is requesting a staffing waiver as there are only two paramedics who live within their area. The paramedics available for service do not work full-time for any paramedic service. They want to offer paramedic service when available, but otherwise operate at an intermediate level.

Wendover has two paramedics living in the area who work with Wendover Ambulance Service when available to work and when they are not, the ambulance service falls back to the lower level.

There have been previous temporary staffing requested by Springdale Ambulance, but their need was resolved by an agreement with Hurricane.

Tammy Barton suggested that personnel to perform at the level of their certification.

Some of the problems identified were:

- ✓ Training to keep up with skills
- ✓ Legality to responding with only one paramedic
- ✓ Liability for agency
- ✓ Two paramedics necessary on scene, but not on transport

There was lengthy discussion regarding some states where calls are answered by one paramedic and one EMT-I or EMT on the ambulance. It was felt that Utah progressed and did not want to move backward in patient care.

Mike Moffitt moved that Wendover must:

- 1. Maintain a set of protocols by their medical director and approved by the EMS Committee;
- 2. have a plan for training to meet all requirements for paramedic level;
- 3. all equipment required on a paramedic rescue and ambulance must be available; and
- 4. the equipment be picked up by personnel arriving for an ambulance call.

Shellie Young seconded the motion and it was approved by votes in the affirmative from Mark Bair, Tammy Barton, George Coombs, Kathy Johnson, Mike Moffitt, and Shellie Young and Kevin Johnson. Breck Rushton voted against the motion. There were no abstentions.

Lauara Snyder shared a form that the Operations subcommittee developed to leave with the ED physician.

Air Ambulance Task Force

Paul Patrick presented the Senate Bill presented by Mrs. Dole regarding *Backgrounder: Air Ambulance Service*. The document also included a letter from North Carolina and references for the document. Due to the time frame of this meeting, the discussion will be tabled until the October EMS Committee Meeting. a copy will be sent to all members of the Committee for discussion.

Legislative Report

Paul Patrick presented the 2007 Legislative Report to the Committee and reminded them that the 2008 Legislative Report was due in November. He said as the report came from the Committee, it is important to get input from the members of the Committee. A copy will be given to all members of the Committee for their input at the October EMS Committee Meeting.

Mike Moffitt moved that the EMS Committee study the 2007 Legislative Report and prepare input for the 2008 report to be included in the October meeting of the Committee. It was seconded by Kevin Johnson and passed with affirmative votes by Mark Bair, Tammy Barton, George Coombs, Kathy Johnson, Kevin Johnson, Mike Moffitt, Breck Rushton, and Shellie Young.

Update of EMS Committee Appointments

There have been no new appointments but recommendations have been given to the Governor for his approval.

Subcommittee Appointments

Shellie Young reported that a task force for the Department suggested that with the dissolution of the Air Ambulance Subcommittee, the membership of each Subcommittee be increased by one additional Air Medical Representative, thus increasing their membership to 21.

Kathy Johnson moved that the Subcommittees be increased by one additional air medical representative. It was seconded by George Coombs, and passed with affirmative votes from Mark Bair, Tamra Barton, George Coombs, Kathy Johnson, Kevin Johnson, Mike Moffitt, Breck Rushton, and Shellie Young.

Shellie Young presented the Subcommittee appointments and reappointments for the approval of the EMS Committee. They were:

Operations Subcommittee

Name	Position	Action	Expiration Date
Joseph Lynn Yeates	Sheriff – Box Elder Co.	Appointed – 1 st Term	6/30/2011
Todd Richardson	Paramedic	Appointed – 1 st Term	6/30/2011
Eric Swanson	Air Ambulance Rep.	Appointed – 1 st term	6/30/2011
Bill Butts	Air Ambulance Rep.	Appointed – 1 st Term	6/30/2009
Brent Mabey	Emergency Physician	Reappointed – 2 nd Term	6/30/2011
Lauara Snyder	Private Amb. Service	Reappointed – 2 nd Term	6/30/2011
Deanna Wolfe	Emergency Nurse	Reappointed – 2 nd Term	6/30/2011

Training and Certification Subcommittee

Name	Position	Action	Expiration Date
Mark Orascovich	Emergency Physician	Reappoint – 2 nd term	6/30/2011
Carol Huff	Dispatcher	Reappoint – 2 nd term	6/30/2011
Dorrell Henderson	Basic EMT	Reappoint – 2 nd term	6/30/2011

John Miller	Paramedic	Reappoint – 2 nd term	6/30/2011
Gennie Mulqueen	Nurse – ENA	Reappoint – 2 nd term	6/30/2011
Jay Downs	Training Officer	Reappoint – 2 nd term	6/30/2011
Pam Mooare	Air Medical Rep.	Appoint – new pos.	6/30/2011

Shellie Young moved that the recommended reappointments and newly appointed members of the subcommittees be approved as suggested. Mike Moffitt seconded the motion, and it was passed by votes in the affirmative from Mark Bair, Tammy Barton, George Coombs, Kathy Johnson, Kevin Johnson, Mike Moffitt, Breck Rushton, and Shellie Young.

There was no other business.

Mark Bair moved that the meeting adjourn, it was seonded by George Coombs and passed with an affirmative vote by Mark Bair, Tammy Barton, George Coombs, Kathy Johnson, Kevin Johnson, Mike Moffitt, Breck Rushton, and Shellie Young.

Minutes were prepared by Sharon Ormond, Executive Secretary, Bureau of Emergency Medical Services. Reviewed and approved by the EMS Committee on October 8, 2008.